

ISSUE SLIP STABLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	RT		6-29-00
FORMALITY REVIEW		48	7/6/00
RESPONSE FORMALITY REVIEW	MIF	549	8-9-00

INDEX OF CLAIMS

- ✓ Rejected
- ✓ Allowed
- ✓ (Through numeral) Canceled
- ✓ Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Final	Original	Date
1	✓	✓	10/10/00
2			
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6	✓	✓	10/10/00
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11	✓	✓	10/10/00
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16	✓	✓	10/10/00
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21	✓	✓	10/10/00
22	✓	✓	10/10/00
23	✓	✓	10/10/00
24	✓	✓	10/10/00
25	✓	✓	10/10/00
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36	✓	✓	10/10/00
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40	✓	✓	10/10/00
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46	✓	✓	10/10/00
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Claim	Final	Original	Date
51	✓	✓	10/10/00
52	✓	✓	10/10/00
53	✓	✓	10/10/00
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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